Fill ir	this information to identify your case:						only as c	lirected in this form and	d in Form
Debt	or 1 Brandy Lynne Greene				122	\-1Supp:			
Debt (Spous	or 2					1. There	is no pres	umption of abuse	
Unite	ed States Bankruptcy Court for the: Eastern District of	Tennes	ssee			applie	s will be r	to determine if a presumade under <i>Chapter 7</i>	
Case (if know	number				_		`	icial Form 122A-2).	
(II KNO	wn)							does not apply now be y service but it could ap	
						Check i	f this is a	in amended filing	
Off	<u>icial Form 122A - 1</u>								
Ch	apter 7 Statement of Your Cur	rent	Mor	nthly l	nco	ome			12/1
case r qualify Part	a separate sheet to this form. Include the line number to wounder (if known). If you believe that you are exempted frowing military service, complete and file Statement of Exempter. Calculate Your Current Monthly Income What is your marital and filing status? Check one or	m a pres ption fro	sumption	of abuse be	ecaus	you do no	t have pri	marily consumer debts of	or because of
	■ Not married. Fill out Column A, lines 2-11.								
	\square Married and your spouse is filing with you. Fill our	ut both (Columns	A and B, li	ines 2	-11.			
	☐ Married and your spouse is NOT filing with you.	You an	d your s	pouse are	e :				
	Living in the same household and are not lega						•		
	Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are living apart for reasons that do not include evading	egally s	eparated	l under nor	nbank	ruptcy law	that appli	es or that you and you	
10 the	I in the average monthly income that you received from all 1(10A). For example, if you are filing on September 15, the 6-me 6 months, add the income for all 6 months and divide the total ouses own the same rental property, put the income from that p	onth per by 6. Fil	iod would I in the res	be March 1 sult. Do not i	throug include	h August 31 any income	I. If the ame amount m	ount of your monthly incornore than once. For examp	ne varied during ble, if both
						Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	Your gross wages, salary, tips, bonuses, overtime, and commissions (before a payroll deductions).				\$	S	0.00	\$	
	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.				f S	S	0.00	\$	
	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.								
	filled in. Do not include payments you listed on line 3.				,	·	0.00	\$	
5.	Net income from operating a business, profession,	or tarm		tor 1					
	Gross receipts (before all deductions)	\$	0.00						
	Ordinary and necessary operating expenses	-\$	0.00						
	Net monthly income from a business, profession, or far	m \$	0.00	Copy her	e -> \$	i	0.00	\$	
6.	Net income from rental and other real property		_						
		•		tor 1					
	Gross receipts (before all deductions)	-\$ -	0.00						
	Ordinary and necessary operating expenses	· —		Copy her	.6 -> ¢		0.00	\$	
_	Net monthly income from rental or other real property	\$_		2-67 1101	ψ		0.00	\$	

7. Interest, dividends, and royalties

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Brandy Lynne Greene Case number (if known) Column B Column A Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.. 0.00 0.00 Total amounts from separate pages, if any. 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 0.00 \$ \$ \$ 0.00 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 0.00 Multiply by 12 (the number of months in a year) **x** 12 0.00 12b. The result is your annual income for this part of the form 13. Calculate the median family income that applies to you. Follow these steps: TN Fill in the state in which you live. Fill in the number of people in your household. 1 53,004.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b.

Go to Part 3 and fill out Form 122A-2.

Debtor 1

Debtor 1	Brandy Lynne Greene	Case number (if known)						
Part 3:	S: Sign Below							
	By signing here, I declare under penalty of perjury that the inform	nation on this statement and in any attachments is true and correct.						
2	χ /s/ Brandy Lynne Greene							
	Brandy Lynne Greene Signature of Debtor 1							
Dat	te 01/12/2023 MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file Form 122A-2.							
	If you checked line 14b, fill out Form 122A-2 and file it with this for	orm.						